January 7, 2011

State of Washington Department of Ecology Post Office Box 47775 Olympia, WA 98504-7775

Attn:

J. Mike Harris / Marie Peter

Water Resources Department

Re:

TEMPORARY WATER USE PERMIT

APPLICATION NO. G2-28757 – TOWNSHIP LINE ROAD WELLS

Ladies and Gentlemen:

In accordance with your letter dated December 5, 2002, we are forwarding water usage information regarding the District's Township Line Road Wells, under Temporary Water Use Permit Application No. G2-28757.

The "period of use" for this well is considered to be intermittent throughout the year, and only used when the turbidity is too high for our primary surface water source. The maximum rate of withdrawal is 35 gpm. The Well Tag Numbers for this source are: 1) North Well #ACA564 and 2) South Well #ACA565.

The additional information listed below is enclosed for your review:

- Chlorination Plant and Turbidity Report. Daily or as-used meter readings (in cubic feet), listing the volume of water withdrawn and treated. These reports are compiled monthly and forwarded to the Washington State Department of Health. Reports for all of 2010 are enclosed.
- Water Production Data. Monthly and annual water production data (in KCF) are listed from the time the well was drilled in January 1994 through December 2010. Daily and monthly peak demand data (in GPM / MGD) is also listed.

If you have any questions or comments, please contact me at 360.565.3216.

Sincerely,

Michael L. Kitz

Water/Wastewater Superintendent

MLK/va

Enclosures

(H:/vickya/wp51/water/forms/DOE Township Well)



Bringing Energy To Life™

RECEIVED

JAN 112011

WA State Department of Ecology (SWRO)

ALLAM PUD - WATE			ATA		SYSTEM:		LUD #1		10 10 10 10 10 10 10 10 10 10 10 10 10 1														
ATER PRODUCTION	(KCF/MO.)		S	OURCE:		TOWNS	HIP LINE	ROAD W	/ELL													
	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	94-98 5-yr Avg.	94-03 10-yr Avg.	
JAN	0	16	23	57	33	29	0	12	12	26	4	13	19	16	16	22	18				26	21	
FEB	52	73	44	0	0	28	12	0	14	0	12	0	6	0	0	0	0				34	22	
MAR	47	35	0	31	0	7	0	0	10	15	0	23	5	11	1	19	0				23	14	
APR	134	0	9	27	0	0	0	8	4	4	0	43	0	0	0	0	0				34	19	
MAY	226	2	0	8	0	0	0	0	0	0	14	13	8	11	0	0	0				47	24	
JUN	113	0	0	21	0	0	0	0	2	0	0	0	0	0	0	0	0				27	14	
JUL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0	
AUG	0	0	0	0	0	0	0	6	0	0	0	0	0	0	0	0	0				0	1	
SEP	0	0	0	25	0	0	0	0	0	0	0	26	2	8	0	66	0				5	2	
OCT	16	112	30	39	0	9	45	32	0	37	9	15	2	32	0	33	0				39	32	
NOV	124	59	22	14	68	79	47	52	63	28	31	27	31	29	35	24	0				57	55	
DEC	112	35	65	22	35	22	18	23	32	10	24	22	19	9	0	3	0				54	37	3
TOTAL (KCF/YR)	824	332	193	243	136	174	122	132	137	121	95	181	92	115	52	166	18			-	398	241	19
AVG. (KCF/MO.)	69	28	16	20	11	15	10	11	11	10	8	15	8	10	4	14	1				33	20	1
VG. MONTH (MGD)	0.02	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.01	0	
VG. MONTH (GPM)	11.72	4.72	2.74	3.45	1.94	2.48	1.73	1.88	1.95	1.72	1.35	2.57	1.31	1.64	0.74	2.35	0.25				4.91	3	
EAK MONTH (MGD)	0.06	0.03	0.02	0.01	0.02	0.02	0.01	0.01	0.02	0.01	0.01	0.01	0.01	0.01	0.01	0.02	0.00				0.03	0	
EAK MONTH (GPM)	38	19	11	10	12	13	8	9	11	6	5	7	5	5	6	11	3				17.97	14	
PEAK DAY (MGD)	0.06	0.06	0.04	0.04	0.05	0.03	0.05	0.05	0.04	0.02	0.07	0.04	0.04	0.08	0.06	0.05	0.01				0.05	0	
PEAK DAY (GPM)	41	45	27	26	33	20	36	37	29	15	45	24	25	58	44	32	6				34.36	31	
PEAK DAY/AVG.	3.53	9.53	9.80	7.52	16.89	8.18	20.72	19.63	14.91	8.64	33.62	9.50	19.41	35.10	59.42	13.61	25.73				9.45	12	
PEAK DAY	06-May	12-Oct	03-Dec	20-Mar	17-Nov	25-Feb	23-Oct	15-Nov	13-Nov	23-Jan	10-Oct	14-Sep	07-Nov	09-May	07-Jan	08-Jan	19-Jan						

	-	1				
	- 1		352 4 A	Ber	6	\$ 12.
			1000	Sec.	100	
4				Ber.	2 3	9.12
	- 1		B 2 2	A.	7,177	1
_	-	_		and the same	_	-

ME:				SYSTEM:	PORT AND	GELES CON	IPOSITE (#4	132960)		HYPOCHLOR	TE SOLUTION	STRENGTH 1 GAL.	A.
	JAMES MONEY			SOURCE:	TOWNSHIP	LINE WELL	(S03)			OF COMPOL	IND ADDED FO	OR EVERY 19 GAL.	
TLE:				TYPE &	STRENGTH CH	LORINE AS D	ELIVERED:			OF WATER.			1
	WATER / WASTEWA	TER SUPERVISOR		1. GAS:					%		=		
TY:		MONTH:	YR:	11	D HYPOCHLORI				12.5 %			CHLORINE PER	
	PORT ANGELES	JANUARY	2010	3. POWE	DERED HYPOCH	ILORITE:			%	GALLON OF	SOLUTION.		
	QUANTI	TY OF WATER TREA	ATED		C	HLOR. USE	D		SYSTEM EV	/ALUTATION			
ATE	METER READING	VOLUME	POUN	ine	TANK	GAL.	LBS.	CALCU-	RESI-	DE-		REMARKS	
2/17	Voq C.F.	AOCOMIC	POOR	403	GALS.	USED	USED	LATED	DUAL	MAND	TIME		
9/3:1	2557500				31			4.7		*	4.4	DT WELLS OFF @ 9 AM	
1													
2	2561400	3900	2433	60	26.5	4.5	0.27	1.10	0.89	0.21	12:30 PM	DT WELLS OFF	1
3													
4													
5													
6						2 2							
7													
8													
9			1-										
10													
11	2561400				46.5						10:25	AH WELL #1 ON (MIX-	46.57
12	2201700				10.0						TO TO A TO	All record of ordinary	1.00
13	2567000	5600	3494	140	36.75	9.75	0.585	1.67	0.87	000	4:15000	AH WELL#1 OFF	
14	2361000	3600	3412	FTU	36,13	1.15	0,303	1.07	0.67	0,00	T.15FM	ATT WELL #1 OFF	1
15	2567000		1		2/ 75					1	0.40	AH WELL # ON	
16	2561000		1		36.75					1	B:40AM	AH WELL A ON	
17			-										
-	2573800	6810	4249	11	07.55	13	0.825	1.94	1.00	0.65	.0. == 1	0.063	
19			1					1	1.29		3:55PM 1/18	3:55PM WELL #1 OF	D
20	575100	1300	8112	.0	40,0	3.0	0.18	2,22	1.54	0.68	10:00Am	AH WELL HI DEE	
21			1				-		× .		-		1
22					-			-		-			-
23			-		-			-	-		-		-
24							-		-				-
25			 				-				-		
26			-				-	-		-	-		
27			-				-			-	-		
28					-					-			
29			-										
_													
30			-										
	<u> </u>	<u> </u>			1						<u></u>		
WICKY	AVEXCELL/CHLORINATION/TO/	MNSHIP	TOTAL MAX.	DAILY		AVG MAX	DAILY		MICHAEL I H	CITY 200 7	11-120	DATE SENT 2 8-10	-

*LEASE SEE REVERSE SIDE FOR FORMULAS)

(360) 452-9771

CERT. #1466

PUBLIC UTILITY DISTRICT NO. 1 OF CLALLAM COUNTY

C	HLORINATION PLANT & TURBIDITY REPORT		Sept 1 188
	SYSTEM: PORT ANGELES COMPOSITE (#432960)	HYPOCHLORITE SOLUTION STRENGTH 1 GAL.	Albar
JAMES MONEY	SOURCE: TOWNSHIP LINE WELL (S03)	OF COMPOUND ADDED FOR EVERY 19 GAL.	
	TYPE & STRENGTH CHLORINE AS DELIVERED:	OF WATER.	
WATER / WASTEWATER SUPERVISOR	1. GAS:	%	
MONTH: YR:	2. LIQUID HYPOCHLORITE: 12.5	% 0.06 LBS. OF AVAILABLE CHLORINE PER	

	PORT ANGELES			DERED HYPOCH	ILORITE:		% GALLON OF SOLUTION.						
	QUANTI	TY OF WATER TREA	ATED		CHLOR. USE	<u> </u>			/ALUTATION		REMARKS		
神	METER READING C.F.	VOLUME	POUNDS	TANK GALS.	GAL. USED	LBS. USED	CALCU- LATED	RESI- DUAL	DE- MAND	TIME		77	,
	2575100			40.							AH	noll =	+1 off
1											-		
2													
3				-									
4				-							-		
5				+							-		
7				+									
3				-							-		
)				 									
0				1									
1									8 7 1				
2													
3			-		9								
4												1	
5			 										
6													
7											1		
8													
0													
1													
2													
3													
4													
4 5 6													
6													
7	-												
8	4		, i										
9													
0													

H:\VICKYA\EXCEL\CHLORINATION REPORT FORM\TOWNSHIP

(PLEASE SEE REVERSE SIDE FOR FORMULAS)

TOTAL MAX. DAILY

AVG. MAX. DAILY _____

MICHAEL L. KITZ ___

(360) 452-9771

CERT. #1466

DATE SENT: 3 1-10

	i	FILE AARU
	-	
STE	ENGTH '	1 GAP

ME:			l l	SYSTEM:		GELES COM		OF COMPOUND ADDED FOR EVERY 19 GAL.						
	JAMES MONEY			SOURCE:		LINE WELL					ND ADDED F	OR EVERY 19 GAL.		
LE:				i .	STRENGTH CH	LORINE AS D	ELIVERED:		0/	OF WATER.				
	WATER / WASTEWA			1. GAS:	HYPOCHLOR	ITE.		,	12.5 %	0.06 LBS. OF AVAILABLE CHLORINE PER				
Y:	PORT ANGELES	MARCH Z	YR:		ERED HYPOCH					GALLON OF				
=		TY OF WATER TREA		0. 10115.		CHLOR. USE	D		SYSTEM E	ALUTATION		REMARKS		
	METER READING				TANK	GAL.	LBS.	CALCU-	RESI-	DE-		REIVIARRS		
ATE	METER READING 0 C.F. 2575 10 0	VOLUME	POUN		GALS.	USED	USED	LATED	DUAL	MAND	TIME			
9/3	2575100				40.							AH well #1 OFF		
1														
3														
3														
4														
5			14.0											
6														
7														
8														
9														
10														
11							1 1			4.7	*			
12														
13														
14														
15							9							
16														
17												/*		
18														
1	21													
20														
21														
22														
23														
24														
25														
26														
27														
28														
29)													
30														
31											5	D		
H.WICK	YA\EXCEL\CHLORINATION REP	OPT FORMITOWNSHIP	TOTAL MAY	DAILY		AVG. MAX I	MILV	The second secon	MICHAEL I L	att M. I.	11.7 RAS	DATE SENT: A-C(D)		

SYSTEM: PORT ANGELES COMPOSITE (#432960) SOURCE: TOWNSHIP LINE WELL (S03) TYPE & STRENGTH CHLORINE AS DELIVERED: 1. GAS: 2. LIQUID HYPOCHLORITE: 3. POWDERED HYPOCHLORITE: GALS. GALS. UNDS TANK GAL. LES. CALCU- GALS. USED CALCU- LES. CALCU- LES. CALCU- LES. CALCU- LES. CALCU- RESI- DUAL MAND TIME CALCU- MAND TIME CALCU- MAND TIME CALCU- CALCU- CALCU- MAND TIME CALCU- CALCU- CALCU- MAND TIME CALCU- CALCU- CALCU- CALCU- CALCU- MAND TIME CALCU- CALCU- CALCU- CALCU- MAND TIME CALCU-
12.5 % 60 8YSTEM EV B DUAL

PUBLIC LITHITY DISTRICT NO. 1 OF CLALLAM COUNTY

(PLEASE SEE REVERSE SIDE FOR FORMULAS)

C	HLORINATION PLANT & TURBIDITY REPORT	and the second s
	Stotem. Forty into 2220 Community (in to 2007)	HYPOCHLORITE SOLUTION STRENGTH 1 GAL.
JAMES MONEY	SOURCE: TOWNSHIP LINE WELL (S03)	OF COMPOUND ADDED FOR EVERY 19 GAL.
	TYPE & STRENGTH CHLORINE AS DELIVERED:	OF WATER.
WATER / WASTEWATER SUPERVISOR	1. GAS:	
MONTH: YR:	2. LIQUID HYPOCHLORITE: 12.5 %	0.06 LBS. OF AVAILABLE CHLORINE PER

(360) 452-9771

	QUANTIT	Y OF WATER TRE	ATED	(CHLOR. USE	D ,		SYSTEM E	VALUTATION			REMARKS	
TE MI 19/10	ETER READING C.F.	VOLUME	POUNDS	TANK GALS.	GAL. USED	LBS. USED	CALCU- LATED	RESI- DUAL	DE- MAND	TIME			
31 2	C.F. 575/00			40							60	well #1	of
	01-												
	OFF										<u> </u>		
											-		
											-		
											-		
											-		
)											-		
							-			,	-	-	
-				-					-		-		
					1.6						-		
											-		
5				-	*		1						
-				-							1.		
•									-		-		
				-							-		
			-	-			1				-		
1				-	-				 		-		
-			1	-							-		
2											-		
1				-	-						-		
5							-			-	-		
-													
-	/ /												
3	/												
	/										1		
5													
1									1		—		

:	JAMES MONEY			SYSTEM:		SELES COM	POSITE (#4	(32960)		HYPOCHLORI OF COMPOU	TE SOLUTIOND ADDED F	N STRENGTH 1 GA	上. 篇题
:	OAMED MORE!				TRENGTH CH			OF WATER.					
	WATER / WASTEWAT	TER SUPERVISOR		1. GAS:									
	PORT ANGELES	JUNE	Z010	11	HYPOCHLORI					.5 % _0.06 LBS. OF AVAILABLE CHLORINE PER % GALLON OF SOLUTION.			
	QUANTIT	Y OF WATER TR	EATED		C	HLOR. USE	D .		SYSTEM E	VALUTATION		REMARKS	
E	METER READING 10 C.F. 2575100	VOLUME	POU	NDS	TANK GALS.	GAL. USED	LBS. USED	CALCU- LATED	RESI- DUAL	DE- MAND	TIME		
7	2575100				40							(oc well #1	OFF
1													
-													
	Salve												
	NU MAR												
1													
-													
-										-		-	
+			-										
1													
1										-			
1												 	
1												1	
1													
1													
1												-	
1		A				0	1.0					1.	
1													
1													
1			-										
4												1 1 1	
-			-							-		-	
+			-									-	
+			-							-		-	
1	*		+							-		-	
+			-							-		-	

(PLEASE SEE REVERSE SIDE FOR FORMULAS)

TOTAL MAX. DAILY

(360) 452-9771

CERT. #1486

DATE SENT: 7-6-10

-	100	II P	AA	MI
			Manual I	Y
i			AA	

AME:		SYSTEM:	PORT AN	GELES COM	POSITE (#4	HYPOCHLORITE SOLUTION STRENGTH 1_ GAL.				
	JAMES MONEY	SOURCE:		LINE WELL		OF COMPOUND ADDED FOR EVERY 19 GAL.				
TLE:		TYPE & S	TRENGTH CH	ILORINE AS D	ELIVERED:	OF WATER.		9		
	WATER / WASTEWATER SUPERVISOR	1. GAS:					%			
TY:	PORT ANGELES MONTH: July YR: 201	The same of the sa	HYPOCHLOR							E CHLORINE PER
		3. POWDE	RED HYPOCH					GALLON OF SOLUTION.		
	QUANTITY OF WATER TREATED		(CHLOR. USE	D		SYSTEM EV	REMARKS		
ATE	METER READING VOLUME	OUNDS	TANK	GAL.	LBS.	CALCU-	RESI-	DE-		
	C.F.	OUNDS	GALS.	USED	USED	LATED	DUAL	MAND	TIME	
0/31	2575100									
1										
2										
3										
4	MOUSE									11
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										11
23			"							
24										
25								10.		
26										
27										
28										-
29										
30										
31	ł									
VICK	YA\EXCEL\CHLORINATION REPORT FORM\TOWNSHIP TOTAL	AX. DAILY		AVG. MAX. D	DAILY		MICHAEL L. K	ITZ-mit	JIK	DATE SENT: 8-6-10

(360) 452-9771

.EASE SEE REVERSE SIDE FOR FORMULAS)

JAMES MONEY			SYSTEM: SOURCE:		GELES COM LINE WELL	POSITE (#4 . (S03)	132960)		HYPOCHLORITE SOLUTION STRENGTH 1 GAL. OF COMPOUND ADDED FOR EVERY 19 GAL.			
WATER / WASTE	NATER SUPERVISOR		1. GAS:		ILORINE AS D	ELIVERED:	OF WATER.					
PORT ANGELES	August	YR: 2010		HYPOCHLOR			0.06 LBS. GALLON OF		E CHLORINE PER			
QUAN	ITITY OF WATER TRE	ATED		(CHLOR. USE	D .		SYSTEM E	EVALUTATION REMARKS			
METER READING 0 C.F.	VOLUME	POUN	IDS	TANK GALS.	GAL. USED	LBS. USED	CALCU- LATED	RESI- DUAL	DE- MAND	TIME		
2575100		1		40							GC well #1 OF	
0/-												
	-											
	+	-										
		-										
		1							- 1			
					-							
The same of the sa		-										
		-										
		-							-	-		
		+										
		-								-		
		-										
		-										
									(ITZMata)			

NAME:									HYPOCHLORITE SOLUTION STRENGTH 1 GAL.			
	JAMES MONEY	SOURCE: TOWNSHIP LINE WELL (S03)							OF COMPOUND ADDED FOR EVERY 19 GAL.			
TITLE:						LORINE AS D	ELIVERED:	OF WATER.				
	WATER / WASTEWA		1. GAS:					%				
CITY:		MONTH:	YR: 2010	2. LIQUIE	HYPOCHLOR	ITE:						E CHLORINE PER
-	PORT ANGELES	SEPT.	2010	3. POWD	HYPOCHLOR ERED HYPOCH	ILORITE:				GALLON OF		
		TY OF WATER TREA	TED		CHLOR. USED				SYSTEM EV	REMARKS		
DATE	METER READING	VOLUME	POUN	IDS	TANK	GAL.	LBS.	CALCU-	RESI-	DE-		
	C.F.				GALS.	USED	USED	LATED	DUAL	MAND	TIME	
	2575100											
1												
-6	NO USE											
4										-		
5												
6												
7												
8												
9	 				+							
10					+							
11												
12												
13									1			
14												
15												
16												
17												
19												
20												
21												
22										-		
23												
24	\											
25	\					-						
26	1											
27					-							
28	/						-					
29					-	-	-					
30					-							
31			TOTAL MAY		1	AVG MAY	DAUM		MICHAELL	(ITT PM /	1117	DATE SENT: (0-8-10

H:\VICKYA\EXCEL\CHLORINATION REPORT FORM\TOWNSHIP (PLEASE SEE REVERSE SIDE FOR FORMULAS)

(360) 452-9771

MASS MONEY					T	DODT AND	251.55.0014	DOCITE (#	(22000)		LIVEOCI II ODI	TE COLUTION	L CTREMOTH 4 OAK	
### WATER / WASTEW SUPER/ISOR 1, GAS:	NAME:	111150 110151/			SYSTEM:				HYPOCHLORITE SOLUTION STRENGTH 1 GAL.					
No. 1. 1. 1. 1. 1. 1. 1.										-1				
No.	1	MATERINASTENIA	TED CUDEDVICOR		11	STRENGTH CH	ILORINE AS D	ELIVERED:		OF WATER.				
PORT ANCELES				VP	-11	HABUCHI UB	ITE.		9	125 %	0.06 LBS. 0	OF AVAILABLE	E CHI ORINE PER	
CHAPTER CHAP					11				9		-1			
DATE METER READING VOLUME POUNDS TANK GAL. USED USED LATED DUAL MAND TIME					Jo. 1 0112									
C.F. VOLUME			TY OF WATER TRE	ATED									REMARKS	
C.F. GALS, USED USED LATED UNAL MANU TIME	DATE		VOLUME	POU	NIIS		1		II.					
1		C.F.					USED	USED	LATED	DUAL	MAND	TIME		
3		2513160				2/20								
4	1													
4)												
5 6 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	-													
6														
7														
8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9														
9 10 11 11 12 13 14 15 15 15 16 17 17 17 17 17 17 17														
10	-													
11														
12														
13													×	
14 15 16 17 17 17 18 18 19 19 19 19 19 19														
15						-	-							
16 17 18 19 19 19 19 19 19 19														
17														
19 20 21 22 23 24 25 26 27 28 29 29 29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	-					-								
20	17			1										
20						-								
21														
22	-													
23						-						-		
24				-		-	-			-		-		
25														
26	-					-	-			-				
27 28 29 2572 CC 30 31	11													
28 29 2575 100 30 31	-										-			
29 2575 /cm 30 31 31 4 5 5 7 5 /cm 3 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7						-	-							
30 31	-					1000	-				-	-	11 11/4 87 CE	
31	-	2575100				900	-		-			-	12 1/8 / 131	
37 NOUVELL VITZ 45 7 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1			-		-		-			
	31						<u></u>	<u></u>		MOUATILL	(IT7 -000 -/	14-2	DATE OF 11/8/201	

(PLEASE SEE REVERSE SIDE FOR FORMULAS)

(360) 452-9771

CERT. #1466

AE:				SYSTEM:											
	JAMES MONEY			SOURCE:	OR EVERY 19 GAL.										
.E:					TYPE & STRENGTH CHLORINE AS DELIVERED: OF WATER.										
	WATER / WASTEWA	TER SUPERVISOR		1. GAS:											
Y:		MONTH:	YR:	2. LIQUID HYPOCHLORITE: 12.5 % 0.06 LBS. OF AVAILABLE CHLORINE PER											
_	PORT ANGELES	November !	2010	3. POWI	3. POWDERED HYPOCHLORITE: % GALLON OF SOLUTION.										
	QUANTI	TY OF WATER TRE	EATED			CHLOR. USE	D		SYSTEM E	REMARKS					
ATE	METER READING	VOLUME	POUN	ine	TANK	GAL.	LBS.	CALCU-	RESI-	DE-					
119	() C.F.	VOLOME	1001	103	GALS.	USED	USED	LATED	DUAL	MAND	TIME				
33)	257900				EMPTY							GC WELL # 1 OFF			
1															
2	A . 11														
3	NO USE														
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15							-								
16															
17												•			
18															
19															
20	7														
21															
22															
23															
24															
25												is a second of the second of t			
26															
27															
28															
29															
30															
31															
VICKY	A\EXCEL\CHLORINATION REP	ORT FORMITOWNSHIP	TOTAL MAX.	DAILY		AVG. MAX. I	DAILY		MICHAELLE	117-m. 7	11-17	DATE SENT: 12 -4-10			

(PLEASE SEE REVERSE SIDE FOR FORMULAS)

(360) 452-9771

CERT. #1466

ME:					PORT AND	GELES COM	POSITE (#4	HYPOCHLORITE SOLUTION STRENGTH 1 GAL.					
JAMES MONEY				SOURCE:		LINE WELL		OF COMPOUND ADDED FOR EVERY 19 GAL.					
LE: TYPE					STRENGTH CH	LORINE AS D	ELIVERED:	OF WATER.					
	WATER / WASTEWA	ATER SUPERVISOR	1. GAS:	GAS:%									
IY:		MONTH:	YR:		HYPOCHLORI							E CHLORINE PER	
	PORT ANGELES	DECEMBER	2010	3. POWD	. POWDERED HYPOCHLORITE: % GALLON OF SOLUTION.								
	QUANT	ITY OF WATER TRE	ATED		(CHLOR. USE			SYSTEM E	/ALUTATION REMARKS			
ATE	METER READING	VOLUME	POUN	ine	TANK	GAL.	LBS.	CALCU-	RESI-	DE-			
19	10 C.F.	VOLUME	Pour	4D2	GALS.	USED	USED	LATED	DUAL	MAND	TIME		
0/31					EMPTY							GC WELL #1 OFF	
1												1	
2	NO USE												
3									=				
4													
5													
6													
7	1												
8	1									1			
9													
10	257522				20						11.3CA	Mira Weall.	
11											=		
12	NO USE												
13													
14													
15													
16													
17													
18													
15													
20												100	
21													
22													
23													
24													
25	/												
26													
27													
28													
29													
30													
31	1												
H:\VICK	YAIEXCELICHLORINATION RE	PORT FORM\TOWNSHIP	TOTAL MAX.	DAILY		AVG. MAX.	DAILY		MICHAEL L.	KITZ Michan	DIPR	DATE SENT: 1-10-11	

(360) 452-9771

(PLEASE SEE REVERSE SIDE FOR FORMULAS)